



# START FOR

YMCA of Metro Atlanta

## Site Observation Form

Site Name: \_\_\_\_\_ Center Manager/Leader: \_\_\_\_\_

Date: \_\_\_\_\_ Teacher/Co-Teacher/Adult Volunteer/Sub: \_\_\_\_\_

Monitor: \_\_\_\_\_ Lesson Plan Scheduled for Today: \_\_\_\_\_ Classroom: \_\_\_\_\_

Compliance Code: (M =met) (NM =not met)	Not Completed 0	Strongly Disagree 1	Disagree 2	Neither Agree nor Disagree 3	Agree 4	Strongly Agree 5
<b>A. General</b>						<b>Comments</b>
1. Activities started on time.	NM / M 0 1 2 3 4 5	Scheduled time:	Arrival time:	End time:		
2. Teacher had equipment needed for lesson plan ready to use.	NM / M 0 1 2 3 4 5					
3. Teacher brought emergency kit to playground/activity room.	NM / M 0 1 2 3 4 5					
4. Entire structured activity session lasted at least 20 minutes.	NM / M 0 1 2 3 4 5					
5. Teacher called children by name to express positive feedback/reinforcement.	NM / M 0 1 2 3 4 5					
6. Session was kept verbally positive by avoiding negative words.	NM / M 0 1 2 3 4 5					
7. Teacher kept physical contact positive by avoiding negative actions.(eg, yanking, pulling, grabbing)	NM / M 0 1 2 3 4 5					



## Site Observation Form

Compliance Code: (M =met) (NM =not met)	Not Completed 0	Strongly Disagree 1	Disagree 2	Neither Agree nor Disagree 3	Agree 4	Strongly Agree 5
<b>B. Physical Activity/Games</b>		<b>Comments</b>				
8. Teacher brought the lesson plan pages 1 of 6 through 6 of 6.	NM / M 0 1 2 3 4 5					
9. Teacher demonstrated the proper use of all equipment.	NM / M 0 1 2 3 4 5					
10. Structured physical activity started with warm up.	NM / M 0 1 2 3 4 5					
11. Each physical activity component lasted the designated time (eg, 1 minute, 2 minutes) according to the lesson plan guidelines.	NM / M 0 1 2 3 4 5					
12. Each physical activity component was followed by a 30-second transition activity.	NM / M 0 1 2 3 4 5					
13. Children were kept moderately to vigorously active throughout the entire scheduled activity session according to lesson plan guidelines.	NM / M 0 1 2 3 4 5					
14. Children remained active not standing and waiting to take turns during physical activities.	NM / M 0 1 2 3 4 5					
15. Activities flowed continuously from page 1 of 6 through 6 of 6.	NM / M 0 1 2 3 4 5					
<b>C. Behavioral Skills</b>						
16. Teacher completed goal setting activity for one gross motor skill each week on <i>Achievement Chart</i> for children by using stickers.	NM / M 0 1 2 3 4 5					
17. Teacher used same <i>Achievement Chart</i> until all gross motor skills are filled in.	NM / M 0 1 2 3 4 5					
18. Teacher completed self monitoring of physical activity using <i>My Daily Activity Log</i> according to lesson plan guidelines.	NM / M 0 1 2 3 4 5					
19. <i>My Daily Activity Logs</i> are sent home at end of every month encouraging parent involvement.	NM / M 0 1 2 3 4 5					
20. Completed certificates are sent home at end of every month encouraging parent involvement.	NM / M 0 1 2 3 4 5					



## Site Observation Form Plan of Correction

Report reviewed with: \_\_\_\_\_

Item(s) Noncompliance	Plan of Correction	Recommendations/Follow Up

SAMPLE

I acknowledge that the items noted in this report have been discussed with me and I agree to the plan of correction in this report.

\_\_\_\_\_  
Signature of Center Manager/Leader

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Monitor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Teacher/Co-Teacher

\_\_\_\_\_  
Date